

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Robert G.</i>	<i>52</i>	<i>11-30-01</i>
O.I.P.E. CLASSIFIER	<i>W</i>	<i>1040</i>	<i>12/11</i>
FORMALITY REVIEW			<i>2-8-0</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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